

Washington County Rural Telephone Cooperative, Inc.
PO Box 9 • 105 E. Railroad Street • Pekin, Indiana 47165

JUL - 3 2014

FCC Mail Room

June 27, 2014

REDACTED - FOR PUBLIC INSPECTION

Via Electronic Filing

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

Re: WC Docket No. 10-90, WC Docket No. 11-42
2014 ETC Annual Report of Washington County Rural Telephone Cooperative, Inc.
Study Area Code 320834

Dear Secretary,

On behalf of Washington County Rural Telephone Cooperative, Inc., we have attached for filing confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to 47 CFR 54.313 and 47 CFR 54.422 of the Commission's rules. Washington County Rural Telephone Cooperative, Inc. seeks confidential treatment under the FCC's Protective Order for the information filed pursuant to Section 54.313(f)(2) of the Commission's regulations¹. Washington County Rural Telephone Cooperative, Inc. also seeks confidential treatment under the Commission's existing confidentiality rules at 47 CFR 0.457 and 47 CFR 0.459 for the information filed pursuant to Section 54.313(a)(1). The redacted version is also being filed this date via the FCC's Electronic Comment Filing System.

Sincerely,



Sara Morris

Accounting Manager

Washington County Rural Telephone Cooperative, Inc.

Enclosures

No. of Copies rec'd 0+1
List ABCDE

¹ *Connect America Fund et al.*, WC Docket No. 10-90 *et al.*, Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order).

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Received & Inspected

JUL - 9 2014

FCC Mail Room

ANNUAL REPORTING FOR ALL CARRIERS		54.813 Completion Required	54.822 Completion Required
<010> Study Area Code	320834		
<015> Study Area Name	WASHINGTON CTY RURAL		
<020> Program Year	2013		
<030> Contact Name: Person USAC should contact with questions about this data	Sara Morris		
<035> Contact Telephone Number: Number of the person identified in data line <030>	8129675521 ext.		
<039> Contact Email Address: Email of the person identified in data line <030>	sara.morris@tale-mediasolutions.coop		
<100> Service Quality Improvement Reporting	(complete attached worksheet)	4	4
<200> Outage Reporting (voice)	(complete attached worksheet)	4	4
<210> <input checked="" type="checkbox"/> check box if no outages to report		4	4
<300> Unfulfilled Service Requests (voice)		4	4
<310> Detail on Attempts (voice)	(attach descriptive document)	4	4
<320> Unfulfilled Service Requests (broadband)		4	4
<330> Detail on Attempts (broadband)	(attach descriptive document)	4	4
<400> Number of Complaints per 1,000 customers (voice)		4	4
<410> Fixed	0.0	4	4
<420> Mobile	0.0	4	4
<430> Number of Complaints per 1,000 customers (broadband)		4	4
<440> Fixed	0.0	4	4
<450> Mobile	0.0	4	4
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	4	4
<510> 320834Ln510.pdf	(attach descriptive document)	4	4
<600> Functionality in Emergency Situations	(check to indicate certification)	4	4
<610> 320834Ln610.pdf	(attach descriptive document)	4	4
<700> Company Price Offerings (voice)	(complete attached worksheet)	4	4
<710> Company Price Offerings (broadband)	(complete attached worksheet)	4	4
<800> Operating Companies and Affiliates	(complete attached worksheet)	4	4
<900> Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)	4	4
<1000> Voice Services Rate Comparability	(check to indicate certification)	4	4
<1010> 320834Ln1010.pdf	(attach descriptive document)	4	4
<1100> Terrestrial Backhaul (Y/N)?	(if not, check to indicate certification)	4	4
<1110>	(complete attached worksheet)	4	4
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	4	4
Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet			
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			
<2000>	(check to indicate certification)	4	4
<2005>	(complete attached worksheet)	4	4
Rate of Return Carriers, Proceed to BOR Additional Documentation Worksheet			
<3000>	(check to indicate certification)	4	4
<3005>	(complete attached worksheet)	4	4

(100) Service Quality Improvement Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 320834
<015> Study Area Name WASHINGTON CFT RURAL
<020> Program Year 2013
<030> Contact Name - Person USAC should contact regarding this data Sara Morris
<035> Contact Telephone Number - Number of person identified in data line <030> 8129675521 ext.
<039> Contact Email Address - Email Address of person identified in data line <030> sara.morris@tele-media-solutions.coop

<110> Has your company received its ETC certification from the FCC? (yes / no) ☐ ☒
If your answer to Line <110> is yes, do you have an existing §54.202(a) "5
<111> year plan" filed with the FCC? (yes / no) ☐ ☐

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

320834in112.pdf

Name of Attached Document

Please check these boxes below to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How (USF) was used to improve service quality
- <116> How (USF) was used to improve service coverage
- <117> How (USF) was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

[illegible]

FCC Form 481
OMB Control No. 3060-0866/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320834
<015>	Study Area Name	WASHINGTON CTY RURAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Sara Morris
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129675521 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sara.morris@tele-mediationsolutions.coop

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	19.95

[illegible]

FCC Form 481
OMB Control No. 3060-0908 / OMB Control No. 3060-0819
July 2013

[illegible]

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0886/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320034
<015>	Study Area Name	WASHINGTON CTY RURAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Sara Morris
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129675521 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sara.morris@tele-mediasolutions.coop
<810>	Reporting Carrier	Washington County Rural Telephone Cooperative, Inc.
<811>	Holding Company	N/A
<812>	Operating Company	N/A

[illegible]

**(900) Tribal Lands Reporting
Data Collection Form**

FOC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	329834
<015> Study Area Name	WASHINGTON CTY RURAL
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Sara Morris
<035> Contact Telephone Number - Number of person identified in data line <030>	8129675921 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	sara.morris@tele-mediasolutions.coop

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(8) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes, No, NA)

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320834
<015>	Study Area Name	WASHINGTON CTRY RURAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Sara Morris
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129675523 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sara.morris@tele-media-solutions.com

Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) ☐

Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) ☐

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0619
July 2013

<010> Study Area Code	320834
<015> Study Area Name	WASHINGTON CTY RURAL
<020> Program Year	2013
<030> Contact Name - Person USAC should contact regarding this data	Rara Morris
<035> Contact Telephone Number - Number of person identified in data line <030>	8129475521 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	rara-morris@ra-media-solutions.com

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<1210> Terms & Conditions of Voice Telephony Lifeline Plans

3208341210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP

*Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- | | |
|--|-------------------------------------|
| <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, | <input checked="" type="checkbox"/> |
| <1222> Details on the number of minutes provided as part of the plan, | <input checked="" type="checkbox"/> |
| <1223> Additional charges for toll calls, and rates for each such plan. | <input checked="" type="checkbox"/> |

(2009) Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 483
OMB Control No. 3060-0886/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320031
<015>	Study Area Name	WHEATSTONE CTRY RVN/A
<020>	Program Year	2013
<030>	Contact Name - Person USAC should contact regarding this data	Sara Morris
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129675521 ext.
<038>	Contact Email Address - Email Address of person identified in data line <030>	sara.morris@tele-media-solutions.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, Frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))	<input type="checkbox"/>
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))	<input type="checkbox"/>
Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.313(a))		
<2012>	2013 Frozen Support Certification	<input type="checkbox"/>
<2013>	2014 Frozen Support Certification	<input type="checkbox"/>
<2014>	2015 Frozen Support Certification	<input type="checkbox"/>
<2015>	2016 and future Frozen Support Certification	<input type="checkbox"/>
Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016>	Certification Support Used to Build Broadband	<input type="checkbox"/>
Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification	<input type="checkbox"/>
<2018>	5th year Broadband Service Certification	<input type="checkbox"/>
<2019>	Interim Progress Certification	<input type="checkbox"/>
<2020>	Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	<input type="checkbox"/>

<2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(0000) Rate Of Return Center Additional Documentation

Rate Collection Form

FCC Form 401

OMB Control No. 3050-0065/OMB Control No. 3050-0019

July 2013

(0010) Study Area Code 320824
 (0011) Study Area Name WASHINGTON CTY BUREAU
 (0012) Program Year 2013
 (0013) Contact Name - Person USAC should contact regarding this data DALE RUCCIA
 (0014) Contact Telephone Number - Number of person identified in data line (0013) 8138613321 EXT.
 (0015) Contact Email Address - Email address of person identified in data line (0013) DALE.RUCCIA@mediasolutions.com

CHECK the boxes below to note compliance on its this year service quality plan (pursuant to 47 CFR § 54.310(b)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(b)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(b)(1)(i))

[Redacted Box]
Name of Attached Document Listing Required Information

Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (b)(1)(i), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

☐

(3011) Community Anchor Institutions (47 CFR § 54.313(b)(1)(ii))

[Redacted Box]
Name of Attached Document Listing Required Information

(3012) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(b)(2))

(3014) If yes, does your company file the RUS annual report

(Yes/No)

(Yes/No)

☒ ☐

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(b)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)

☐

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

[Redacted Box]
Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, is your company audited?

(Yes/No)

☒ ☐

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(b)(2), contains:

(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications

☐

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

(3021) Management letter issued by the independent certified public accountant that performed the company's financial audit.

☐

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(b)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers.

☐

(3023) Underlying information subjected to a review by an independent certified public accountant

☐

(3024) Underlying information subjected to an officer certification.

☐

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

3208241n3026.pdf

(3026) Attach the worksheet listing required information

[Redacted Box]
Name of Attached Document Listing Required Information

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Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0066/OMB Control No. 3060-0819 July 2013
---	---

<010> Study Area Code	320834
<015> Study Area Name	WASHINGTON CTY RURAL
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Barb Morris
<035> Contact Telephone Number - Number of person identified in data line <030>	8129675521 ext.
<038> Contact Email Address - Email Address of person identified in data line <030>	sara.morris@tele-media-solutions.coop

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	WASHINGTON CTY RURAL
Signature of Authorized Officer:	CERTIFIED ONLINE Date 06/27/2014
Printed name of Authorized Officer:	Ernest Burnett
Title or position of Authorized Officer:	Vice-President
Telephone number of Authorized Officer:	8129673171 ext.
Study Area Code of Reporting Carrier:	320834 Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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Certification - Agent / Carrier Data Collection Form		FCC Form 481 OAS Control No. 3080-9988/OAS Control No. 3065-0618 July 2013
<010> Study Area Code	220834	
<015> Study Area Name	WASHINGTON CTY RURAL	
<020> Program Year	2015	
<030> Contact Name - Person USAC should contact regarding this data	Sara Morris	
<035> Contact Telephone Number - Number of person identified in data line <030>	8129675521 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030>	sara.morris@tale-mediasolutions.coop	

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	
Name of Authorized Agent or Employee of Agent:	
Signature of Authorized Agent or Employee of Agent:	Date:
Printed name of Authorized Agent or Employee of Agent:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

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(600) Operating Companies
 Data Collection Form

FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320834
<015>	Study Area Name	WASHINGTON CTY RURAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Sara Morris
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129475521 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	sara.morris@tele-mediasolutions.coop
<010>	Reporting Carrier	Washington County Rural Telephone Cooperative, Inc.
<011>	Holding Company	N/A
<012>	Operating Company	N/A

[illegible]

320834in510.pdf

Service Quality Standards & Consumer Protection Rules Compliance

Please refer to the following documents regarding annual CPNI Certification with accompanying procedures as well as the documentation regarding the current Red Flag suspension status, including the 1/27/2011 Board of Directors Resolution that exempts Washington County Rural Telephone Cooperative, Inc. from compliance with the FACT Act Red Flag Identity Theft Prevention Program. The Board of Directors agreed to continue the indefinite suspension on January 19, 2012, January 17, 2013 and January 16, 2014.

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CPNI Template Submission

[Customer Proprietary Network Information \(CPNI\) Certification Home](#)

Annual 47 C.F.R. § 64.2009(e) CPNI Certification Template EB Docket 06-36

The new CPNI Submission was saved.

Confirmation Number: 77919324

Certification Year: 2013

Date Filed: Feb 21 2014 9:59AM

Name of Signatory: Roland King

Title of Signatory: President

Company covered by this certification:

- **Washington County Rural Tel. Coop. Inc. dba Tele-Media Solutions (808455)**

Attachment:

- [CPNI Certification 2013.pdf](#)

[View and verify this CPNI Submission](#)

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445 12th Street SW (1-888-225-5322)
Washington, DC 20554 TTY: 1-888-TELL-FCC
[More FCC Contact Information...](#) (1-888-835-5322)

Fax: 1-866-418-0232
E-mail: fccinfo@fcc.gov

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CPNI Template Submission

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Annual 47 C.F.R. § 64.2009(e) CPNI Certification Template EB Docket 06-36

Submission Confirmation Number: **77919324**

Annual 64.2009(e) CPNI Certification for 2014 covering the prior calendar year: 2013

1. Date filed: Feb 21 2014 9:59AM

2. Name of company(s) covered by this certification: • Washington County Rural Tel. Coop. Inc. dba Tele-Media Solutions (808455)

3. Form 499 Filer ID(s): 808455

4. Name of signatory: Roland King

5. Title of signatory: President

6. Certification:

I, Roland King [name of officer signing certification], certify that I am an officer of the company named above, and acting as an agent of the company, that I have personal knowledge that the company has established operating procedures that are adequate to ensure compliance with the Commission's CPNI rules. See 47 C.F.R. § 64.2001 et seq.

Attached to this certification is an accompanying statement explaining how the company's procedures ensure that the company is in compliance with the requirements (including those mandating the adoption of CPNI procedures, training, recordkeeping, and supervisory review) set forth in section 64.2001 et seq. of the Commission's rules.

The company [☐ has ☐ has not] taken actions (i.e., proceedings instituted or petitions filed by a company at either state commissions, the court system, or at the Commission against data brokers) against data brokers in the past year. [NOTE: If you reply in the affirmative, please provide an explanation of any actions taken against data brokers.]

The company [☐ has ☐ has not] received customer complaints in the past year concerning the unauthorized release of CPNI [NOTE: If you reply in the affirmative, please provide a summary of such complaints. This summary should include number of complaints, broken down

by category or complaint, e.g., instances of improper access by employees, instances of improper disclosure to individuals not authorized to receive the information, or instances of improper access to online information by individuals not authorized to view the information.]

The company represents and warrants that the above certification is consistent with 47. C.F.R. § 1.17 which requires truthful and accurate statements to the Commission. The company also acknowledges that false statements and misrepresentations to the Commission are punishable under Title 18 of the U.S. Code and may subject it to enforcement action.

Signed: [☒ Signature of an officer, as agent of the carrier]

Attachments: Accompanying Statement explaining CPNI procedures
Explanation of actions taken against data brokers (if applicable)
Summary of customer complaints (if applicable)



CPNI Certification 2013.pdf

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445 12th Street SW (1-888-225-5322)
Washington, DC 20554 TTY: 1-888-TELL-FCC
[More FCC Contact Information...](#) (1-888-835-5322)
Fax: 1-866-418-0232
E-mail: fccinfo@fcc.gov

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ANNUAL 47 C.F.R. § 64.2009(e) CPNI Certification**EB Docket 06-36****Annual 64.2009(e) CPNI Certification for 2013 covering the prior calendar year 2013**

1. Date filed: 02/21/2014
2. Name of company covered by this certification:
Washington County Rural Telephone Cooperative, Inc.
3. Form 499 Filer ID: 808455
4. Name of signatory: Roland King
5. Title of signatory: President
6. Certification:

I, Roland King, certify that I am an officer of the company named above, and acting as an agent of the company, that I have personal knowledge that the company has established operating procedures that are adequate to ensure compliance with the Commission's CPNI rules. See 47 C.F.R. § 64.2001 et seq.

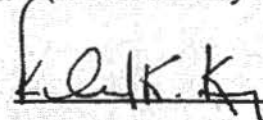
Attached to this certification is an accompanying statement explaining how the company's procedures ensure that the company is in compliance with the requirements (including those mandating the adoption of CPNI procedures, training, recordkeeping, and supervisory review) set forth in section 64.2001 et seq. of the Commission's rules.

The company has not taken actions (i.e. proceedings instituted or petitions filed by a company at either state commissions, the court system, or at the Commission against data brokers) against data brokers in the past year.

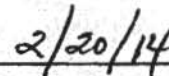
The company has not received customer complaints in the past year concerning the unauthorized release of CPNI.

The company represents and warrants that the above certification is consistent with 47 C.F.R. § 1.17 which requires truthful and accurate statements to the Commission. The company also acknowledges that false statements and misrepresentations to the Commission are punishable under Title 18 of the U.S. Code and may subject it to enforcement action.

Signed: _____



Date: _____



Attachment: Accompanying Statement explaining CPNI procedures

Attachment: Accompanying Statement of Operating Procedures

Per the FCC CPNI rules [47 CFR §64.2009(e)] and as referenced in the attached signed certification, Washington County Rural Telephone Cooperative, Inc. d/b/a Tele-Media Solutions, herein referenced as the Company hereby certifies that the Company [and its affiliates] is in compliance with the FCC CPNI rules and has outlined some of the important operating procedures below in order to ensure the Company's compliance in the protection of CPNI:

1. CPNI manual has been updated in order to account for all FCC CPNI rules, including the recent revisions, and has been adopted by our Company's board
2. CPNI Compliance officer has been designated to oversee all CPNI duties, training, and activity
 - o Established an outbound marketing supervisory review process for the use of CPNI
 - o Records are maintained for any marketing campaigns that utilize customers' CPNI for a minimum of one year
3. Employees have been trained on when they are, and are not, authorized to use or disclose CPNI
 - o Disciplinary process has been defined and is in place for violations and/or breaches of CPNI
4. Carrier authentication requirements have been met
 - o All customer during a customer-initiated telephone call are authenticated as being an authorized account contact before discussing CPNI (non-call detail or call detail) without utilizing readily available biographical or account information as defined by the FCC
 - o Call detail is only released to customers during customer-initiated telephone contact if a password is provided. If the requesting customer does not provide a password, only the following FCC approved methods are permitted for the release of the requested call detail:
 - Sending the requested detail to the address of record (only a physical or email address associated with that particular account that has been in our company files for at least 30 days)
 - Calling the customer back at the telephone of record (only disclosing if the customer was authenticated as being an authorized account contact)
 - Having customer come in to Company's office and provide a valid government issued photo ID
5. Notice to customer of account change as customers are notified immediately when a customer creates or changes one of the following:
 - o password
 - o customer response to a back-up means of authentication for lost or forgotten passwords
 - o online account
 - o address of record
6. Notice of unauthorized disclosure of CPNI, a notification process is in place in order to notify both law enforcement and customer(s) in the event of a CPNI breach within the timeline specified by the FCC
7. Opt-out method for approval of CPNI use for marketing campaigns is utilized
 - o Customers are notified bi-annually of their rights for the use of their CPNI in marketing campaigns
 - o New customers are notified of the opt-out procedure as a part of the customer sign-up process
 - o Billing system displays customer's opting status
 - o Compliance officer retains CPNI notifications and opting records for at least two years
8. Additional protection measures are taken above and beyond the current FCC CPNI rules
 - o Company takes reasonable measures to discover and protect against activity that is indicative of pretexting
 - o Company maintains security of all CPNI, including but not limited to:
 - Documents containing CPNI are shredded
 - Computer terminals are locked when employee is not at the station

**RESOLUTION 01272011 OF THE BOARD OF DIRECTORS FOR
WASHINGTON COUNTY RURAL TELEPHONE COOPERATIVE, INC.**

RESOLUTION: At a meeting of the Board of Directors of Washington County Rural Telephone Cooperative, Inc, hereafter referred to as the Board, which was held on January 27, 2011, and the following resolution was unanimously passed:

BE IT RESOLVED, that the Red Flag Program Clarification Act of 2010 exempts Washington County Rural Telephone Cooperative, Inc. d/b/a Tele-Media Solutions from having to comply with the FACT Act Red Flag Identity Theft Prevention Program, hereafter referred to as the Program, which was created in response to the requirements of the Red Flag Rules established by the Department of the Treasury, Federal Reserve System, Federal Deposit Insurance Corporation, Department of the Treasury, National Credit Union Administration, and Federal Trade Commission, which implemented Section 114 of the Fair and Accurate Credit Transactions Act of 2003:

1. That the Red Flag Clarification Act amended the Fair Credit Reporting Act with respect to the applicability of identity theft guidelines to creditors.
2. That the Act narrowed the definition of a "creditor" as someone who uses credit reports, furnishes consumer information to credit reporting agencies or "advances funds...based on an obligation of the person to repay the funds or repayable from specific property pledges by or on behalf of the person..." and narrowed the scope of the Rule by exempting from the definition of "creditor" the following criterion, "does not include a creditorthat advances funds on behalf of a person for expenses incidental to a service provided by the creditor to that person."

BE IT FURTHER RESOLVED, that the Board will suspend indefinitely Washington County Rural Telephone Cooperative, Inc. d/b/a Tele-Media Solutions' FACT Act Red Flag Identity Theft Prevention Program and will review at least annually and comply as necessary to address changing identity theft risks.

IN WITNESS WHEREOF, I have affixed my name as Secretary of said Washington County Rural Telephone Cooperative, Inc., this 27th day of January 2011.


Betty J. Thomas, Secretary